

PERMANENT SIGN PERMIT APPLICATION

(Code Sections 153.150-153.164)



City of Dublin

Review Services
5800 Shier-Rings Road
Dublin, OH 43016-1236

Phone: 614-410-4600
Fax: 614-718-4346
www.dublin.oh.us

APPLICATION # _____

NOTE: Partial or incomplete applications or sign drawings cannot be processed and will be returned to the applicant. Facsimiles of application forms or sign drawings are not accepted. Permit fees will be accepted only after the Permanent Sign Permit application has been approved. Please contact the Review Services at 614-410-4600 for assistance.

I. PLEASE SUBMIT THE FOLLOWING:

☐ ONE (1) ORIGINAL SIGNED APPLICATION

☐ ONE (1) SCALED AND DIMENSIONED SITE PLAN showing all existing signs and/or proposed signs, their size and height; all streets, property lines, buildings and recorded easements on the site. Dimension all setbacks for ground signs from all property lines and Right-of-Way.

☐ ONE (1) SCALED AND DIMENSIONED SIGN ELEVATION of all proposed signs with applicable foundation/attachment details required by the Building Code. Scaled and dimensioned building elevations are required for all wall, window, canopy, and projecting signs.

☐ ONE (1) SCALED AND DIMENSIONED LANDSCAPE PLAN FOR NEW GROUND SIGNS, listing the type, size, and quantity of all plants. See Section 153.158(D) of the City of Dublin Sign Code. A landscape plan is not required for replacement face applications

II.

SIGN INFORMATION: * Denotes required information based on requirements of the sign code (if applicable to the type of sign requested)

Sign Location/Address *			
SW corner of Frantz Rd & Park Center Dr.			
Sign Copy/Message *			
Pulte Group			
Land Owner or Authorized Agent *		Telephone *	
Dominion Homes / Pulte Group			
Mailing Address		Email *	
4900 Tuttle Crossing, Dublin OH			
Sign Contractor (If known)		Telephone	
Sign Vision Co.		Dir 614-325-9448 / Office 475-5161	
Mailing Address		Email	
487 Claycraft Rd, Columbus OH 43230		lauras@signvisionco.com	
Sign Type *			
<input checked="" type="checkbox"/> GROUND SIGN <input type="checkbox"/> WALL SIGN <input type="checkbox"/> WINDOW SIGN <input type="checkbox"/> PROJECTING SIGN <input type="checkbox"/> ENTRY FEATURE <input type="checkbox"/> OTHER			
Permit Type *		Size of Sign Face *	
<input type="checkbox"/> NEW <input checked="" type="checkbox"/> REPLACEMENT <input type="checkbox"/> OTHER		HEIGHT 25 1/2' WIDTH 73 1/2' =	
Setback from R/W or P/L For all Ground Signs * 20'		Lot Frontage * 500' +	
Overall Height of Sign * 5'-0"		Building Frontage * 200'	
Sign Color * Black		(2) White	
Sign Illumination * INTERNAL <input type="checkbox"/> EXTERNAL <input type="checkbox"/> NOT ILLUMINATED <input type="checkbox"/> PROPOSED <input checked="" type="checkbox"/> EXISTING TO REMAIN		Width of Tenant Space * same	
OPAQUE BACKGROUNDS ARE REQUIRED FOR ALL PERMANENT SIGNS INCLUDING ON-SITE DIRECTIONAL SIGNS			

ADDITIONAL INFORMATION:

FACE REPLACEMENT ONLY - Double sided

Signature of Land Owner/Agent *

☐ LAND OWNER ☒ AGENT

Laura Schmitzer

Date *

10/30/14



CITY OF DUBLIN.

Land Use and
Long Range Planning
5800 Shier-Rings Road
Dublin, Ohio 43016-1236

Phone/ TDD: 614-410-4600
Fax: 614-410-4747
Web Site: www.dublin.oh.us

PLANNING AND ZONING COMMISSION APPLICATION

(Code Section 153.232)

I. PLEASE CHECK THE TYPE OF APPLICATION:

- | | |
|---|--|
| <input type="checkbox"/> Informal Review | <input type="checkbox"/> Final Plat
(Section 152.085) |
| <input type="checkbox"/> Concept Plan
(Section 153.056(A)(1)) | <input type="checkbox"/> Conditional Use
(Section 153.236) |
| <input type="checkbox"/> Preliminary Development Plan / Rezoning
(Section 153.053) | <input type="checkbox"/> Corridor Development District (CDD)
(Section 153.115) |
| <input type="checkbox"/> Final Development Plan
(Section 153.053(E)) | <input type="checkbox"/> Corridor Development District (CDD) Sign
(Section 153.115) |
| <input type="checkbox"/> Amended Final Development Plan
(Section 153.053(E)) | <input type="checkbox"/> Minor Subdivision |
| <input type="checkbox"/> Standard District Rezoning
(Section 153.018) | <input type="checkbox"/> Right-of-Way Encroachment |
| <input type="checkbox"/> Preliminary Plat
(Section 152.015) | <input type="checkbox"/> Other (Please Specify): _____ |

Please utilize the applicable *Supplemental Application Requirements* sheet for additional submittal requirements that will need to accompany this application form.

II. PROPERTY INFORMATION: This section must be completed.

Property Address(es): 4900 Tuttle Crossing, Dublin OH	
Tax ID/Parcel Number(s): parcel # 19-WV	Parcel Size(s) (Acres): 199,000 ± 297' x 669' 4.57 acres
Existing Land Use/Development: business	

IF APPLICABLE, PLEASE COMPLETE THE FOLLOWING:

Proposed Land Use/Development: business
Total acres affected by application:

III. CURRENT PROPERTY OWNER(S): Please attach additional sheets if needed.

Name (Individual or Organization): Pulte Group	
Mailing Address: (Street, City, State, Zip Code) 4900 Tuttle Crossing Blvd Dublin OH 43016	
Daytime Telephone: 614-376-1075	Fax: 614-356-6750
Email or Alternate Contact Information: wendy.innocenti@pulte.com	

IV. APPLICANT(S): This is the person(s) who is submitting the application if different than the property owner(s) listed in part III. Please complete if applicable.

Name: <u>Wendy Innocenti</u>	Applicant is also property owner: yes <input type="checkbox"/> no <input checked="" type="checkbox"/>
Organization (Owner, Developer, Contractor, etc.): <u>Pulte Group</u>	
Mailing Address: (Street, City, State, Zip Code) <u>4900 Tuttle Crossing Blvd, Dublin, OH 43016</u>	
Daytime Telephone: <u>614-376-1075</u>	Fax: <u>614-356-6750</u>
Email or Alternate Contact Information: <u>wendy.innocenti@pulte.com</u>	

V. REPRESENTATIVE(S) OF APPLICANT / PROPERTY OWNER: This is the person(s) who is submitting the application on behalf of the applicant listed in part IV or property owner listed in part III. Please complete if applicable.

Name:	
Organization (Owner, Developer, Contractor, etc.):	
Mailing Address: (Street, City, State, Zip Code)	
Daytime Telephone:	Fax:
Email or Alternate Contact Information:	

VI. AUTHORIZATION FOR OWNER'S APPLICANT or REPRESENTATIVE(S): If the applicant is not the property owner, this section must be completed and notarized.

I, <u>TERRY E. GEORGE, VICE PRES. OF DRC PROPERTIES INC.</u> , the owner, hereby authorize <u>Wendy Innocenti</u> to act as my applicant or representative(s) in all matters pertaining to the processing and approval of this application, including modifying the project. I agree to be bound by all representations and agreements made by the designated representative.	
Signature of Current Property Owner: <u>Terry George VP.</u>	Date: <u>1/7/15</u>

☐ Check this box if the Authorization for Owner's Applicant or Representative(s) is attached as a separate document

Subscribed and sworn before me this 7 day of January, 20 15

State of Ohio

County of Franklin

Notary Public

Bethany Kungl



Bethany Kungl
Notary Public, State of Ohio
My Commission Expires 10-21-

VII. AUTHORIZATION TO VISIT THE PROPERTY: Site visits to the property by City representatives are essential to process this application. The Owner/Applicant, as noted below, hereby authorizes City representatives to visit, photograph and post a notice on the property described in this application.

I, <u>Wendy Innocenti</u> , the owner or authorized representative, hereby authorize City representatives to visit, photograph and post a notice on the property described in this application.	
Signature of applicant or authorized representative: <u>Wendy Innocenti</u>	Date: <u>1/7/15</u>

VIII. UTILITY DISCLAIMER: The Owner/Applicant acknowledges the approval of this request for review by the Dublin Planning and Zoning Commission and/or Dublin City Council does not constitute a guarantee or binding commitment that the City of Dublin will be able to provide essential services such as water and sewer facilities when needed by said Owner/Applicant.

I <u>Laura Schweitzer</u> , the owner or <u>authorized representative</u> , acknowledge that approval of this request does not constitute a guarantee or binding commitment that the City of Dublin will be able to provide essential services such as water and sewer facilities when needed by said Owner/Applicant.	
Signature of applicant or authorized representative: <u>Laura Schweitzer</u>	Date: <u>1/5/15</u>

IX. APPLICANT'S AFFIDAVIT: This section must be completed and notarized.

I <u>see attached</u> , the owner or authorized representative, have read and understand the contents of this application. The information contained in this application, attached exhibits and other information submitted is complete and in all respects true and correct, to the best of my knowledge and belief.	
Signature of applicant or authorized representative:	Date:

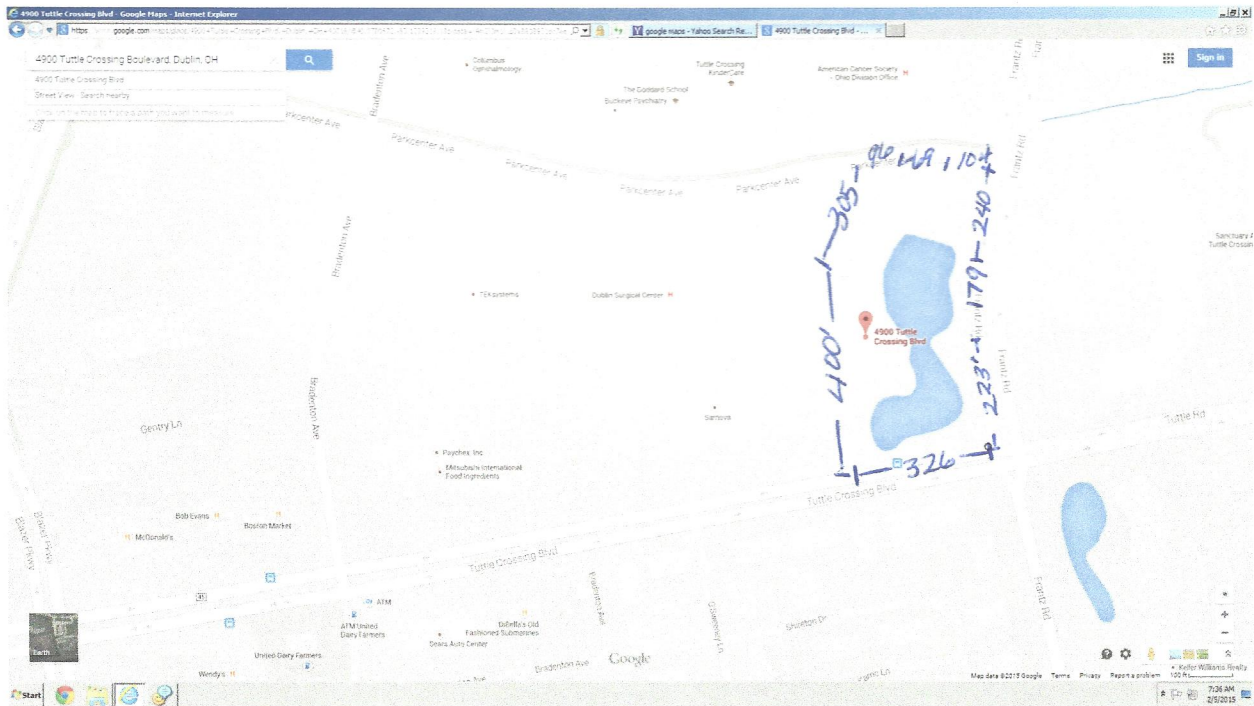
Subscribed and sworn to before me this _____ day of _____, 20_____

State of _____

Stamp or Seal

County of _____ Notary Public _____

FOR OFFICE USE ONLY			
Amount Received:	Application No:	P&Z Date(s):	P&Z Action:
Receipt No:	Map Zone:	Date Received:	Received By:
City Council (First Reading):		City Council (Second Reading):	
City Council Action:		Ordinance Number:	
Type of Request:			
N, S, E, W (Circle) Side of:			
N, S, E, W (Circle) Side of Nearest Intersection:			
Distance from Nearest Intersection:			
Existing Zoning District:		Requested Zoning District:	



199,000 sq ft How parcel was measured

326' across Tuttle Crossing Blvd
 669' along Frantz Rd
 269' across Park Center Ave
 305' diagonally across round about
 400' back to Tuttle along drive

$$326 + 269 \div 2 \times 669' = 199,027.5 \text{ sq ft}$$

(Front & back) (side)